

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000004278

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** ADVANTAGE FUNDING MANAGEMENT CO., INC.

**Current Principal Place of Business:**

1111 MARCUS AVENUE  
SUITE M27  
LAKE SUCCESS, NY 11042

**New Principal Place of Business:**

**Current Mailing Address:**

1111 MARCUS AVENUE  
SUITE M27  
LAKE SUCCESS, NY 11042

**New Mailing Address:**

**FEI Number:** 51-0421382

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KAYE, EDWARD P  
Address: 1111 MARCUS AVENUE #M27  
City-St-Zip: LAKE SUCCESS, NY 11042

Title: D  
Name: MOKKOH, NOBUYUKI  
Address: 375 LEXINGTON AVENUE, 6TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

Title: D  
Name: MIYAWAKI, HIROFUMI  
Address: 375 LEXINGTON AVENUE, 6TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

Title: V  
Name: COOLBAUGH, ERIC C  
Address: 1111 MARCUS AVENUE #M27  
City-St-Zip: LAKE SUCCESS, NY 11042

Title: ST  
Name: KAPLAN, MICHAEL P  
Address: 1111 MARCUS AVENUE #M27  
City-St-Zip: LAKE SUCCESS, NY 11042

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL KAPLAN

ST

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date